

DEPARTMENT OF TREASURY

PROCESS RECEIPT AND RETURN

Plaintiff: UNITED STATES OF AMERICA	Court Case Number: 04-CR-544
Defendant: KUN FUK CHENG	Type of Process: Forfeiture - Service

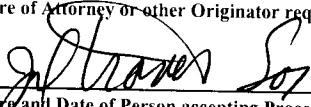
SERVE AT: (Name of Individual, Company, Corporation, etc. to be served or Description of property to Seize: (Address: street or RFD, Apt. No., City, State and Zip Code):

Chao Jian Lin, 15 Park Avenue, Clifton Park, New York 12065

Send notice or service copy to requester at Name and Address below: GLENN T. SUDDABY, United States Attorney, NDNY 218 James T. Foley Courthouse 445 Broadway Albany, New York 12207	Number of Processes to be Served Number of Parties to Served Check box if service is on USA
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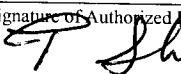
Special Instructions or Other Information that will assist in expediting service (includes business and alternate addresses, telephone numbers and estimated times available for Service:

Please serve the following: A certified copy of the Preliminary Order of Forfeiture and the Notice of Publication and Forfeiture

Signature of Attorney or other Originator requesting service on behalf of:  /Thomas A. Capezza, AUSA	(X) Plaintiff () Defendant	Telephone No. 518-431-0247	Date 2/14/06
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Signature and Date of Person accepting Process:

SPACE BELOW FOR USE OF DEPARTMENT OF TREASURY

I acknowledge receipt for the total number of process indicated.	District of Origin No. _____	District to Serve No. _____	Signature of Authorized Dept. of Treasury Agency Officer 	Date 2/15/06
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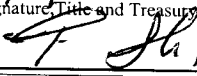
I HEREBY CERTIFY AND RETURN THAT I () PERSONALLY SERVED. () HAVE LEGAL EVIDENCE OF SERVICE. (X) HAVE EXECUTED AS SHOWN IN 'REMARKS'. THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, CORPORATION, ETC., AT THE ADDRESS SHOWN ABOVE OR ON THE ADDRESS INSERTED BELOW

() I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.

Name and Title of individual served if not shown above. () A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address: (complete only if different than shown above)

Date of Service
2/16/06 - Certified Mail
Time of Service () a.m. () p.m.

Signature Title and Treasury Agency
 Special Agent IRS-CI

REMARKS:

A certified copy of the Preliminary order of forfeiture and Notice of Publication and forfeiture were sent by Certified Mail on 2/16/06 to Chao Jian Lin at the address listed above.

7005 0390 0005 8339 5931

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
CLIFTON PARK, NY 12065		
Postage	\$ 1.11	UNIT ID: 0616 Postmark Here Clerk: KJ420C 02/16/06
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.36	
Send To Chao Qian Lin Street Apt. No. 15 Park Avenue Clifton Park NY 12065 State ZIP+4		
PS Form 3811, June 2002 See Reverse for Instructions		

16050045
16050047

45+47

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <input checked="" type="checkbox"/> <i>J. Betz</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Chao Qian Lin 15 Park Avenue Clifton Park NY 12065		B. Received by (Printed Name) <i>Jade Betz</i> C. Date of Delivery <i>2/16/06</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
2. Article Number (Transfer from service label)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes			